

Branch Office Registration Form**Form must include a signature of one of the following:**

Designated Responsible Licensed Producer (DRLP), Officer, Director, Principal or Partner of the business entity

Definition of a Branch Office:

A branch office is any office location, other than the primary location of the licensed business entity, that regularly conducts insurance business or that is advertised as a place where the public may contact the business entity or its employees concerning insurance services. NOTE: An office location that meets this definition, but is a separate legal entity from the licensed business entity, must obtain a separate business entity license and cannot be registered as a branch office. The licensed person designated as responsible for the business entity (DRLP) is responsible for all branch locations.

Assumed Name/Doing Business As (DBA):

An assumed name is a name other than the official name of the license as maintained in the OFIR database. Prior registration of a DBA is required with our office using the FIS 0201 form.

Main Office Information (Licensee):

Business Entity Producer Name		FEIN	System ID#
Business Address – Line One		Business Address – Line Two	
City		State	Zip Code
Phone No.	Ext.	Fax No.	State of Domicile

Branch Office Information:

Complete Business Name & Address of Branch (Name under which you are doing business in Michigan) Note: You must supply a street or location address; a P.O. box is not allowed for registration purposes.		
Name	Indicate which action should be taken: Add Branch Office Inactivate Branch Office	
Street Address – Line One	Street Address – Line Two	
City	State	Zip Code
Email Address	Business Phone No.	Business Fax No.

*Signature:*_____
Name and Title (typed or printed)_____
System ID# (if applicable)_____
Signature_____
Date

Mail completed form to: OFIR Insurance Licensing, PO Box 30220, Lansing, MI 48909-7720
OR Fax to: 517-241-3953

**Michigan Department of Licensing and Regulatory Affairs**

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